

pital Pathologist," which should appeal mainly to masochistic pathologists.

This volume is well illustrated and the photographs are almost uniformly excellent. These reviews are timely and make a welcome addition to pathology literature. It is hoped that this series will continue to appear for a long time to come.

STUART LINDSAY, M.D.

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**METABOLIC TOXEMIA OF LATE PREGNANCY—A Disease of Malnutrition**—By Thomas H. Brewer, M.D., County Physician, Richmond Health Center, Richmond, Calif.; formerly, Instructor, Department of Obstetrics-Gynecology, University of California Medical Center, San Francisco, Calif. Charles C Thomas, Publisher, Springfield, Ill., 1966. 127 pages, \$8.50.

This is an interesting volume in which the author puts forth his ideas concerning the etiology of toxemia of pregnancy. To quote from the first page of the introduction: "Scientific evidence will be presented which clearly indicates that toxemia of late pregnancy is a disease of nutritional deficiency mediated through hepatic dysfunction and that the bacterial flora of the maternal gastrointestinal tract, as well as the steroid hormones (estrogens and progesterone) produced by the placenta, play a contributing role in its pathogenesis." He presents some of his own extensive experience as well as selected references from the literature to support his thesis.

He suggests that malnutrition is the basic cause of toxemia and that it results in hepatic lesions and dysfunction. In support of this hypothesis, he cites pathologic lesions found by Maqueo and states that in these women, a direct correlation was found between a history of low protein intake and the severity of toxemia. Other authors, of course, have reported great variability in the extent and severity of the hepatic lesions, and have found no lesions at all in some patients in whom the disease was so severe that the patients had eclampsia.

He emphasizes the importance of hypoalbuminemia in lowering oncotic pressure, thus permitting tissue edema, but states that the cause of hypoalbuminemia in metabolic toxemia of late pregnancy is not known at present. He does recommend the use of intravenous albumin instead of diuretics.

Some comments are made about the diminished conjugation of placental steroids, and the suggestion is made that the toxemic woman is actually overloaded with placental steroids. The author suspects that sodium-retaining steroids play an important role in the sodium and water retention seen in women who develop clinical edema in pregnancy.

These remarks concerning placental steroids are much too simple and naive. We need much more information about plasma levels, production rates, and details of metabolism of these steroids before any meaningful comments can be made.

The suggestion is made that certain aromatic amino acids are affected by the bacteria of the lower gastrointestinal tract with the production of compounds which may accumulate within hepatic cells and damage or destroy those cells. Ten patients who were treated with neomycin in order to prevent this reaction are presented along with three similar patients who did not receive neomycin. The author feels that loss of edema as determined by loss of weight was quite clearly related to the use of neomycin but many of the patients were started on treatment soon after hospitalization, and it is quite possible that the bed rest contributed heavily to the weight loss. For example, his third "control" patient lost

weight without receiving neomycin. Most of these patients had quite mild examples of toxemia and there is no clear relationship between improvement in the toxemia and neomycin therapy.

A very nice section is included concerning the prevention of toxemia through prenatal nutritional education. Doctor Brewer correctly emphasizes the importance of stressing the value of good nutrition to prenatal patients, and the necessity of reviewing the matter at subsequent prenatal visits. His experience has been quite gratifying in that of the first 235 patients who have delivered, there has not been a single case of metabolic toxemia of late pregnancy.

In summary, I found this to be a very interesting essay concerning the author's hypothesis of the etiology of toxemia of pregnancy. I do not consider the hypothesis well proved from the evidence presented here, but many thought provoking suggestions are made. The emphasis on good nutritional guidance for prenatal patients is very well taken.

WILLIAM J. DIGNAM, M.D.

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**HUANG TI NEI CHING SU WEN—The Yellow Emperor's Classic of Internal Medicine**—By Ilza Veith. University of California Press, Berkeley and Los Angeles, 1966. 260 pages, \$8.00.

It is indeed a pleasure to welcome back into the fold of the "available" this great classic of Chinese medicine, the *Nei Ching*. It has for too long been "out of print," which is unfortunate since it is the single most important work in English for the understanding of the basis of traditional Chinese medicine. It should not be forgotten that perhaps today more people are treated for their ills on the archaic principles (or some modification of them) discussed in this text than are reached by modern Western medicine. Oddly enough, and to some extent initiated by political considerations, there has been a curious and recent resurgence of these ancient methods of therapy, not only in China itself but all over Europe—notably in Russia, France, and Great Britain—which has begun to extend to the United States. Medical journals devoted exclusively to treatment by acupuncture, moxibustion, and other methods based on such antiquated theories, are presently being published in France and the United Kingdom, and possibly elsewhere in the West. Consequently Dr. Veith's book is, in the context of the present day, a good deal more than a significant achievement in the history of medicine. It has become an important social document for the understanding of existing socio-political conditions in the Far East and the irrational aberrations of the West.

The *Nei Ching* is reputed to be the oldest medical text in existence, but this should be accepted with a great deal of caution since legend and reality are so hopelessly intertwined as to make dating impossible. The authorship is ascribed to Huang Ti (the Yellow Emperor), said to be the third of China's first five rulers who flourished circa 2697-2597 B.C. but whose very existence is problematical. Nonetheless, Huang Ti is venerated and worshiped as the father of Chinese Medicine. The existing text is apparently a reworking of an earlier version completed about 762 A.D., but which was certainly in existence during the Han dynasty (circa 206 B.C.-25 A.D.). Doubtless it has passed through many recensions by commentators over hundreds of years, so that little of the original remains. The *Nei Ching* is an immense work, and this volume is the first

and only translation of a major part of it into a Western tongue.

Dr. Veith's translation is accompanied by a most extensive and important introduction which makes the complex philosophical basis and medical system comprehensible. This introduction is by far the most readable, enlightening, and clear account in the literature. This classic is a work of the greatest significance for the general reader interested in sinological matters as well as for physicians, particularly those in California who not infrequently encounter the results of traditional medicine in the state's large Chinese and Japanese population. But even more important, it provides insight into the nature of the Chinese civilization and an aspect of the modern problems of that civilization.

Finally, this is a beautiful book, somewhat smaller in format than the original edition and a reprint of high quality. Unfortunately, not all of the typographical errors from the earlier edition have been corrected.

J. B. DEC. M. SAUNDERS, M.D.

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**PULMONARY DISEASES AND ANOMALIES OF INFANCY AND CHILDHOOD**—Their Diagnosis and Treatment—By Milton I. Levine, M.D., F.A.C.C.P., Attending Pediatrician, New York Hospital; Associate Professor of Clinical Pediatrics, Cornell University Medical Center; Director, Pediatric Pulmonary Clinic, New York Hospital, New York City; and Armond V. Mascia, M.D., F.A.C.C.P., Assistant Attending Pediatrician, New York Hospital; Assistant Professor of Clinical Pediatrics, Cornell University Medical College; Member, Pediatric Pulmonary Clinic, New York Hospital, New York City; Director, Pediatrics, Phelps Memorial Hospital, Tarrytown, New York. Hoeber Medical Division, Harper & Row, Publishers, New York and London, 1966. 368 pages, \$12.00.

This volume is intended to fill a need which has long been felt by every physician who deals with diseases of the chest. No book of this scope has been published previously in the English language. Textbooks relating to chest diseases in adults have neglected to give adequate coverage to the peculiar problems of infancy and childhood. After reviewing this volume it becomes apparent that pediatric chest diseases constitutes a field so broad that it deserves a special textbook.

Physicians with a special interest in tuberculosis will find much to complain about in this book but the references cited should make up for these deficiencies. Foreign bodies in the bronchi must be more important than would be judged by the discussion given here. Many other important topics are given very brief mention with similar or greater space devoted to conditions which are rarely encountered. But the book is a very brief one and attempts to cover too broad a field in such space. Fortunately there are generous references to the literature after most chapters and the student is urged to make use of these.

The illustrations are of good quality and the book is well made. The index leaves much to be desired.

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**A MANUAL OF CLINICAL ALLERGY**—Second Edition—By John M. Sheldon, M.D., Professor of Internal Medicine, University of Michigan Medical School; Robert G. Lovell, M.D., Associate Professor of Internal Medicine, The University of Michigan Medical School; and Kenneth P. Mathews, M.D., Professor of Internal Medicine, University of Michigan Medical School. W. B. Saunders Company, 600 West Washington Square, Philadelphia, Pa. (19105), 1967. 550 pages, \$15.00.

In the Preface of the First Edition published fifteen years ago, the authors stated: "This book is prepared for the physician interested in devoting part of his time to the treatment of allergy patients, or in establishing

an allergy practice . . . There are a number of excellent textbooks and several journals on the subject of allergy. This manual does not attempt to replace or supplant such texts and periodicals but rather should be used in conjunction with them." The second edition continues to emphasize this objective. With exception of a first chapter of 19 pages on *Immunology and Immunochemistry of Allergy*, the book is practically devoid of theory and is concerned almost entirely with the clinical diagnosis and treatment of the more common allergy diseases.

Since the first edition was offered, a new chapter on insect hypersensitivity has been added and there have been substantial extensions of two others. All the diagnostic facets of allergy are described. Specific treatment and hyposensitization to inhalant allergens are fully discussed. Other forms of treatment are carefully evaluated. Although the authors naturally express their own opinions they are sound and are those held by the majority of practicing allergists. The drugs used in symptomatic treatment are listed and this is a valuable chapter. Although under the heading of *The Passing Parade of Medication*, the description of various proposed allergy medicines and procedures that have not proved of value is brief, it is interesting and should be enlightening to physicians who do not read the reports of the allergy drug investigating committees of the national allergy societies.

Appendix I gives a detailed account of how allergenic extracts are made. Undoubtedly, most physicians practicing part-time allergy or just entering into the specialty will prefer to purchase their allergenic extracts rather than equip a laboratory and get involved in the technical procedures of grinding, extracting, dialysing, standardizing, etcetera; nevertheless, anyone who treats allergy patients and uses these extracts should have some idea of how they are prepared.

In conclusion, this volume is a clear, concise allergy manual that should be in the library of every physician who treats allergy diseases; it will be referred to often.

M. COLEMAN HARRIS, M.D.

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**MANUAL OF TROPICAL MEDICINE**—Fourth Edition—By George W. Hunter, III, Ph.D., Col. U.S.A. (Ret.), Lecturer, Microbiology and Biological Sciences, College of Medicine, University of Florida, Gainesville, Florida; formerly, Resident Coordinator of LSU-ICMRT and Research Professor of Medical Parasitology, Department of Tropical Medicine and Medical Parasitology, Louisiana State University, School of Medicine, New Orleans; William W. Frye, Ph.D., M.D., Sc.D. (Hon.), Professor of Tropical Medicine, Director of LSU International Research and Training Programs in Tropical Medicine; and J. Clyde Swartzwelder, Ph.D., Professor of Medical Parasitology and Head of Department of Tropical Medicine and Medical Parasitology, Co-Director, LSU International Research and Training Programs in Tropical Medicine, Louisiana State University, School of Medicine, New Orleans. W. B. Saunders Company, Philadelphia and London, 1966. 931 pages, \$18.50.

This edition of the manual offers a fairly comprehensive presentation of tropical area diseases which are now assuming worldwide importance as travel habits become more extensive.

The manifold aspects of virus diseases in the tropics are discussed quite effectively in a style different from the conventional method of etiologic classification. The differentiation into the various clinical syndromes produced is probably a more effective concept of a complex subject caused by a wide variety of etiologic agents. Description of the epidemiology of the various arboviruses, vector variations, and geographical distribution is a useful tool to the public health worker. Recent diagnostic and therapeutic developments for parasitic diseases as well as the